

South Dakota Medicaid PCP and CHMC Health Home Data Submission

1. Fill out data summary file as per instructions in data submission file layout.
2. File Naming convention : <Clinic/Org Name>_<PCP or CMHC>_<Collection Start_End Date>

**** The name of the clinic/organization providing the services**

File Name Example:

St Johns Medical_PCP_062013_122013.xls

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File Name to start with the name of the company

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Identify if PCP or CMHC

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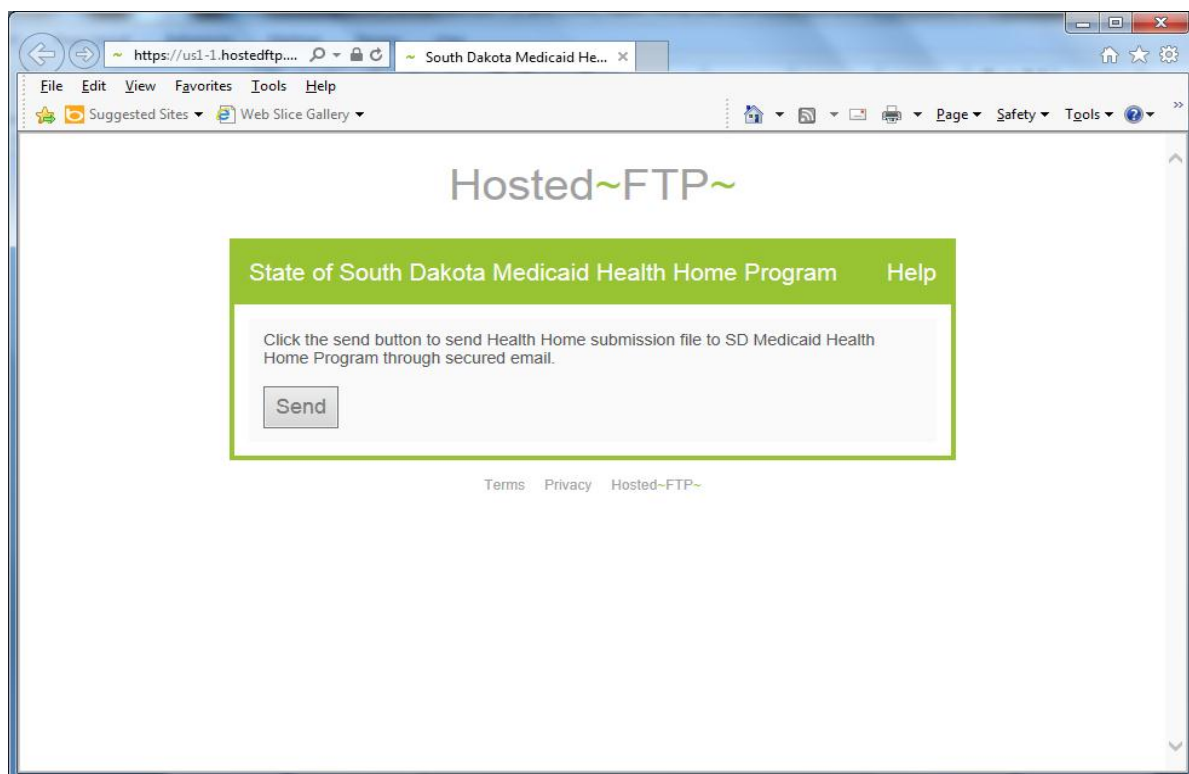
Identify the collection start and end date

3. Uploading Files to Vendor

Link to upload files: <https://us1-1.hostedftp.com/~SDmedicaid>

4. Instructions for upload:

When you activate the above line the following window will appear. Click the send button to start the process of upload file to vendor.



The next screen you will see is a security window where you need to enter the imagine letters into the box and press continue.

South Dakota Medicaid Health Home Program - Internet Explorer

https://us1-1.hostedftp.com/~SDmedicaid/security/?jsessionid=7BA541869FFA19BA84A662E4F2055646?key=nQcGfRxWMZNF1i2fzeA3n25C

Security

Before you can send files to South Dakota Medicaid Health Home Program you must complete the following

RORGGO

Enter the letters in the image above

100%

The next screen you will see is the actual form to submit:

The FROM box needs to include the provider name and the person submitting the file.

The SUBJECT box needs to state the company name and that it is a data submission file along with the collection date of the period.

Press the browse box and search your computer for the file you want to submit.

Click on the file and press open the file will now be listed under the files box.

Click Send.

The screenshot shows a web browser window titled "South Dakota Medicaid Health Home Program - Internet Explorer". The address bar displays the URL: <https://us1-2.hostedftp.com/~SDmedicaid/send/?key=zDhHspmbROotyvBgC9JWlcVT>. The page has a green header with the text "State of South Dakota Medicaid Health Home Program". Below the header, the form contains the following fields and controls:

- To:** South Dakota Medicaid Health Home Program
- From:**
- Subject:**
- Files:**
- Below the Files field, the text "St. Johns Medical_PCP_062013_122013.xlsx" is displayed, followed by a link "Clear all files".
- A large text area below the Files field contains the text "South Dakota State Medicaid Health Home Program".
- At the bottom of the form are two buttons: "Send" and "Cancel".

After you click send the following screen should appear showing the file was successfully loaded.

Click close.



If you have any issues uploaded the files, please send an email to wohara@simplisticanalytics.com.

Please include your name and phone number so vendor can call to assist in submission.